



Complete Summary

TITLE

Mental health: the percentage of patients who were diagnosed with a new episode of depression, and treated with antidepressant medication, and who remained on an antidepressant drug for at least 84 treatment days (12 weeks) after the Index Prescription Date.

SOURCE(S)

Office of Quality Performance. FY 2009, Q2 technical manual for the VHA performance measurement system. Washington (DC): Veterans Health Administration; 2009 Jan 5. various p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of patients who were diagnosed with a new episode of depression, and treated with antidepressant medication, and who remained on an antidepressant drug for at least 84 treatment days (12 weeks) after the Index Prescription Date.

RATIONALE

This indicator monitors the degree to which veterans with a new diagnosis of depression receive effective pharmacological treatment of depression during the 12 week acute treatment phase. It is patterned after a Health Effectiveness Data and Information Set (HEDIS) measure to provide opportunity for non-Veterans Administration (VA) comparison. Although labeled "Mental Health", it should be

recognized many patients with a diagnosis of depression are appropriately provided services exclusively in Primary Care clinics throughout the time period of these measures. In baseline VA data, the new diagnosis of depression was made approximately 50% of the time in Primary Care clinics. Data are collected electronically with 100% sample. Due to the time lag to acquire nationally rolled up pharmacy and workload data, this measure will follow the EPRP quarters for reporting but be reported one quarter in arrears. Patients will be reported in the month the acute phase treatment period is completed.

About Antidepressant Management: Nearly 1 in 6 people with severe, untreated depression commit suicide. Depression affects people of all ages, but often first occurs in a person's late twenties. Elderly people also suffer from high rates of depression. Fortunately, many people can improve through treatment with appropriate medications.

The Case for Improvement: Antidepressant medication management can improve people's quality of life.

- Adults who are depressed are less physically healthy, less socially active and less satisfied with their lives than adults who are not depressed.
- Depression may lead to appetite and sleep disturbances, anxiety, irritability, decreased concentration, and greatly increases risk of suicide.

PRIMARY CLINICAL COMPONENT

Mental health; depression; antidepressant medication management

DENOMINATOR DESCRIPTION

Patients diagnosed with a new episode of depression and treated with antidepressant medication (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Patients diagnosed with a new episode of depression and treated with antidepressant medication who have adequate medication for at least 84 treatment days (12 weeks) after the Index Prescription Date (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

External oversight/Veterans Health Administration
Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care
Behavioral Health Care
Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses
Physician Assistants
Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

See the "Rationale" field.

ASSOCIATION WITH VULNERABLE POPULATIONS

See the "Rationale" field.

BURDEN OF ILLNESS

See the "Rationale" field.

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better
Living with Illness

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Patients diagnosed with a new episode of depression and treated with antidepressant medication

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Patients diagnosed with a new episode of depression* and treated with antidepressant medication

**New episode of depression:* To qualify as a New Episode of Major Depression, two criteria (diagnosis and medications) must be met:

- Must Have Both Index Diagnosis of Major Depression AND Negative Diagnosis History AND
- Must Have Both Index prescription AND Negative Medication History

Note: A patient may be included in this measure more than once if the qualifying criteria are met.

Refer to the original measure documentation for definitions and additional details.

Exclusions

Unspecified

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition
Encounter
Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window brackets index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Patients diagnosed with a new episode of depression and treated with antidepressant medication who have adequate medication for at least 84 treatment days (12 weeks)* after the Index Prescription Date**

Effective acute phase antidepressant medication treatment: Continuity of treatment with antidepressant medications to cover at least 84 days of 114 days following the Index Prescription Date. A 'gap' in antidepressant medications of no more than 30 days total is allowed to accommodate the clinical practice of 'washing out' one medication before starting another if needed, and/or delay in filling/picking up a prescription. Overlapping prescriptions of different medications on the same day are not counted twice. To determine the continuity of treatment, sum the number of gap days to the number of treatment days for a maximum of 114 days from the Index Prescription date. For all prescriptions filled within 114 days of the Index Prescription Date, count until a total of 84 treatment days has been established. Patients whose gap days exceed 30 or who do not have 84 treatment days within the 114 days after the Index Prescription Date are not counted in the numerator.

***Note:** 30 gap days are allowed; therefore, 84 treatment days + 30 gap days = 114 days examined.

****Index Prescription Date:** The earliest prescription date for antidepressants filled within a 44-day period as defined as 30 days prior to through 14 days on or after the Index Episode Start Date.

Refer to the original measure documentation for additional details.

Exclusions

Patients whose gap days exceed 30 or who do not have 84 treatment days within the 114 days after the Index Prescription Date are not counted in the numerator.

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data
Pharmacy data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

New diagnosis of depression.

MEASURE COLLECTION

[Fiscal Year \(FY\) 2009: Veterans Health Administration \(VHA\) Performance Measurement System](#)

MEASURE SET NAME

[Performance Measures](#)

MEASURE SUBSET NAME

[Mental Health Measures](#)

DEVELOPER

Veterans Health Administration

FUNDING SOURCE(S)

Unspecified

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

Unspecified

FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Unspecified

ADAPTATION

Measure was adapted from another source.

PARENT MEASURE

Antidepressant Medication Management: Effective Acute Phase Antidepressant Medication Treatment [National Committee on Quality Assurance (NCQA) Health Effectiveness Data and Information Set (HEDIS)]

RELEASE DATE

2006 Oct

REVISION DATE

2009 Jan

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Office of Quality and Performance (10Q). FY 2008, Q1 technical manual for the VHA performance measurement system. Washington (DC): Washington (DC); 2007 Oct 31. 315 p.

SOURCE(S)

Office of Quality Performance. FY 2009, Q2 technical manual for the VHA performance measurement system. Washington (DC): Veterans Health Administration; 2009 Jan 5. various p.

MEASURE AVAILABILITY

The individual measure, "New Diagnosis of Depression," is published in "FY 2009, Q2 Technical Manual for the VHA Performance Measurement System."

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NQMC STATUS

This NQMC summary was completed by ECRI Institute on March 7, 2008. The information was not verified by the measure developer. This NQMC summary was updated by ECRI Institute on January 8, 2010. The information was verified by the measure developer on March 22, 2010.

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